

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American College of Cardiology Political Action Committee

ADDRESS (number and street)

2400 N St NW

Check if different
than previously
reported. (ACC)

Washington

DC

20037

1153

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00375360

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2011

through

01

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Carlton G. Davids

Signature of Treasurer

Electronically Filed by Carlton G. Davids

Date

02

18

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 13

Write or Type Committee Name
American College of Cardiology Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div><div>Y</div><div>Y</div><div>Y</div><div>2011</div></div>		66368.13
(b) Cash on Hand at Beginning of Reporting Period	66368.13	
(c) Total Receipts (from Line 19)	8870.97	8870.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	75239.10	75239.10
7. Total Disbursements (from Line 31)	18671.60	18671.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56567.50	56567.50
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4053.34	4053.34
(ii) Unitemized	3770.85	3770.85
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	7824.19	7824.19
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤	7824.19	7824.19
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1046.78	1046.78
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	8870.97	8870.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8870.97	8870.97

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	921.60	921.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	921.60	921.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	17500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	250.00	250.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18671.60	18671.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18671.60	18671.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7824.19	7824.19
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7574.19	7574.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	921.60	921.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	1046.78	1046.78
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-125.18	-125.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Maximiliano Arroyo, M.D., F.A.

Mailing Address 3813 Pebble Beach Dr

City

Jonesboro

State

AR

Zip Code

72404-6853

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Associates of
Northeast Ark

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: 8DE409950C4FD17512E

Amount of Each Receipt this Period

365.00

B.

Full Name (Last, First, Middle Initial)

Kenneth P. Brin, M.D., Ph.D

Mailing Address 528 Castle Wynd Dr

City

Loves Park

State

IL

Zip Code

61111-8967

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midwest Heart Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: 327ADFD82F9AFFE448A

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Rajeev Grover, M.D., F.A.

Mailing Address 15402 Conifer Bay Ct

City

Houston

State

TX

Zip Code

77059-3184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bay Area Houston Cardiolo-
gist Associat

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 1 1

Transaction ID: C13CE06909C8ECE8321

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1615.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 13

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bruce J. Iteld, M.D., F.A.

Mailing Address 1516 Robert St

City

New Orleans

State

LA

Zip Code

70115-4039

FEC ID number of contributing
federal political committee.**C**Name of Employer
Louisiana Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	1

Transaction ID: D3CBA32A0D1B1054CD7

Amount of Each Receipt this Period

365.00

B.

Full Name (Last, First, Middle Initial)

Daniel R. Schwartz, M.D., F.A.

Mailing Address 1 Diamond Hill Rd

City

Berkeley Heights

State

NJ

Zip Code

07922-2104

FEC ID number of contributing
federal political committee.**C**Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	1	1

Transaction ID: D2E6FAC15DBA1143C0D

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Lyle A. Siddoway, M.D., F.A.

Mailing Address 25 Monument Rd
Ste 200

City

York

State

PA

Zip Code

17403-5049

FEC ID number of contributing
federal political committee.**C**Name of Employer
Cardiac Diagnostic Associ-
ates

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	1	1

Transaction ID: F7174FAE3304B885A9F

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Suma A. Thomas, M.D., F.A.

Mailing Address 7620 Old Georgetown Rd
Apt 1214

City State Zip Code
Bethesda MD 20814-6182

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 9 / 2 0 1 1

Transaction ID: 4123A79EA35DF632D874

Amount of Each Receipt this Period

208.34

B.

Full Name (Last, First, Middle Initial)

Kenneth P. Tway, M.D., F.A.

Mailing Address 1106 Pacific St

City State Zip Code
San Luis Obispo CA 93401-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
INTERNAL MED.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 1 1

Transaction ID: 3957EA1580335655306

Amount of Each Receipt this Period

365.00

C.

Full Name (Last, First, Middle Initial)

David J. Waldstein, M.D., F.A.

Mailing Address 1350 Fairy Hill Rd

City State Zip Code
Rydal PA 19046-2926

FEC ID number of contributing
federal political committee.

C

Name of Employer
Philadelphia Cardiology
Group

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 1

Transaction ID: AB1BC6A49303D3CFBF0

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

823.34

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 13

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Richard F. Wright, M.D., F.A.

Mailing Address 1038 S Carmelina Ave

City

Los Angeles

State

CA

Zip Code

90049-5810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	1

Transaction ID: 44458168F8D5E5CFE3FD

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

4053.34

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 13

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City

Richmond

State

VA

Zip Code

23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1046.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	1

Transaction ID: 0FA5247CC01F45EEE38

Amount of Each Receipt this Period

1046.78

Reimburse for Dec. Amex
Fees and Jan. Merchant Fe-
es

SUBTOTAL of Receipts This Page (optional)

1046.78

TOTAL This Period (last page this line number only)

1046.78

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
January 2011 Amex Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: VC2B10E18DD1FE2585B5

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

65.30

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
January Merchant Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: M5891C8F962250EC7861

Date of Disbursement

01 / 03 / 2011

Amount of Each Disbursement this Period

856.30

SUBTOTAL of Disbursements This Page (optional)

921.60

TOTAL This Period (last page this line number only)

921.60

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Friends of Joe Heck

Mailing Address PO Box 750114

City
Las Vegas

State
NV

Zip Code
89136

Purpose of Disbursement
2012 Primary

011

Category/
Type

Candidate Name
Joseph Heck, Jr.

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID: 5E6CFEDBB57F933D789

Date of Disbursement

01 / 29 / 2011

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

National Republican Congressional Committee

Mailing Address 320 First Street SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
2011 Contribution

011

Category/
Type

Candidate Name
National Republican Congressional Committee

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: 7600443FD7D9E1F703C

Date of Disbursement

01 / 31 / 2011

Amount of Each Disbursement this Period

15000.00

SUBTOTAL of Disbursements This Page (optional)

17500.00

TOTAL This Period (last page this line number only)

17500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael J. Zakrzewski, D.O., F.A.

Mailing Address 858 Fulton Ave

City
Lansdale

State
PA

Zip Code
19446-5387

Purpose of Disbursement
2011 Contribution

Candidate Name

010

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 5050C12AB9A388BEC33

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2011

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00